OCT 2 7 2000

510(k) Summary

Date:

August 3, 2000

K00 2424

Submitter's Name:

Submitter's Address:

Toshiba America Medical Systems, Inc. P.O. Box 2068, 2441 Michelle Drive,

Tustin, CA 92781-2068

Submitter's Contact:

Diana Thorson, Regulatory Affairs Specialist,

(714)730-5000, Extension 4121

Device Proprietary Name:

Classification Name: Common Name:

3D Angiographic Imaging System, Model XIDF-100A

Image Intensified Fluoroscopic X-Ray System (Accessory)

Image Processor

[Fed. Reg. No. 892.1650, Product Code: JAA]

Predicate Device:

GE Advantage 3D XR (K974715)

Reason for Submission

New option for existing product

Description of this Device:

The 3D Angiographic Imaging System, Model XIDF-100A is an option for the Toshiba Infinix VC, NS, and NB Angiography Systems. The image processor receives two dimensional rotational DSA images acquired by the angiography system, transforms them into three dimensional images, and transmits them to a 3D workstation for viewing.

Summary of Intended Uses:

This system is designed to be used in combination with Toshiba Infinix VC, NS, and NB Angiography Systems, and a 3D Workstation. The image processor receives two dimensional rotational DSA images acquired by the angiography system, transforms them into three dimensional images, and transmits them to a 3D workstation for viewing. The system is intended to support interventional radiology techniques. This device employs no intended uses that are not in cleared devices already found in the marketplace.

Technological Characteristics:

The technological characteristics of this device are the same as that of the predicate device.



Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

OCT 2 7 2000

Diana Thorson Regulatory Affairs Specialist Toshiba America Medical Systems, Inc. 2441 Michelle Drive P.O. Box 2068 Tustin, CA 92781-2068 Re: K002424

3D Angiographic Imaging System,

Model XIDF-100A
Dated: August 3, 2000
Received: August 8, 2000
Regulatory class: II

21 CFR 892.2050/Procode: 90 LLZ

Dear Ms. Thorson:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4639. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Daniël G. Schultz, M.D.

Captain, USPHS

Sincerely yours

Acting Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

510 (k) Number (If Known):		K002424				
Device Name:	Device Name: Toshiba 3D Angiographic Imaging System, Model XIDF-100A					
Indications For	Use:			•		
Angiography dimensional r into three dim	s designed to be use Systems, and a 3D \ rotational DSA image nensional images, an ended to support inte (Please do not write be	Workstation. T es acquired by ed transmits th erventional rac	The image provided in the angiogram to a 3D volume. The image is a second to be a second in the image in the image is a second in the image in the image is a second in the image in the image is a second in the image in the image is a second in the image is a second in the image in the image is a second in the image in the image is a second in the image. In the image is a second in the image is	ocessor re- aphy syste vorkstation iques.	ceives two m, transforms them i for viewing. The	
wandamanaka mana adam di sakahira Arik 1988/1984 (1984) (1984)	Concurrence of	of CDRH, Office	of Device Evalu	ation (ODE)		
Prescription U	(Per 21 CFR 801.1	OR 109)	Over	-the-Counter	Use	
	Divisio Radiol	on Sign-Off) on of Reproductive ogical Devices O (k) Number:	Lynner, Abdominal, E	1	(Optional Format 1-2-96)	